

**-FILED-**

JAN 10 2025

At \_\_\_\_\_ M  
Chanda J. Berta, Clerk  
U.S. DISTRICT COURT  
NORTHERN DISTRICT OF INDIANA**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF INDIANA***[This form is for prisoners to sue for civil rights violations. NEATLY print in ink (or type) your answers.]*JOSE M. Aguirre*[You are the PLAINTIFF, print your full name on this line.]*

v.

Case Number 3:25-cv-30*[For a new case in this court, leave blank.  
The court will assign a case number.]*EIKhart County Sheriff Jeff Siegel*[The DEFENDANT is who you are suing. Put ONE name on this line. List ALL defendants below, including this one.]**[The top of this page is the caption. Everything you file in this case must have the same caption. Once you know your case number, it is VERY IMPORTANT that you include it on everything you send to the court for this case. DO NOT send more than one copy of anything to the court.]***PRISONER COMPLAINT**

#	Defendant's Name and Job Title	Work Address
1	<i>[Put the defendant named in the caption in this box.]</i> <u>Jeff Siegel</u> <u>EIKhart County Sheriff ETAL</u>	<u>EIKhart County Sheriff Dept.</u> <u>26861 CR 26</u> <u>EIKhart, IN. 46517</u>
2	<i>[Put the names of any other defendants in these boxes.]</i> <u>Kendra</u> <u>Summit Catering Supervisor</u>	<u>EIKhart County Jail</u> <u>26861 CR 26</u> <u>EIKhart IN. 46517</u>
3	<u>Carl Farley</u> <u>Summit Catering Supervisor</u>	<u>EIKhart County Jail</u> <u>26861 CR 26</u> <u>EIKhart, IN. 46517</u>

*[If you are suing more defendants, attach an additional page. Number each defendant. Put the name, job title, and work address of each defendant in a separate box as shown here.]*

1. How many defendants are you suing? \_\_\_\_\_

2. What is the name and address of your prison or jail? EIKhart County Jail, 26861  
CR 26, EIKhart IN. 465173. Did the event you are suing about happen there? ☒ Yes. ☐ No, it happened at: The  
Jail Kitchen, Run By Summit Catering.4. On what date did this event occur? on or About May 7, 2024*[DO NOT write in the margins or on the back of any pages. Attach additional pages if necessary.]*

Defendant's Name & Job Title	Work address	PG 1a continued
4 Dr. John Foster WellPath Medical	26861 CR 26 Elkhart IN, 46517	PG 1a
5 WellPath Medical County Jail Medical Services	26861 CR 26 Elkhart IN, 46517	
6 Maintenance Department of Elkhart County Jail Elkhart County Sheriff Dept.	26861 CR 26 Elkhart IN 46517	
7 Summit Catering Services Elkhart County Jail Elkhart County Sheriff Dept.	26861 CR 26 Elkhart IN 46517	



CLAIMS and FACTS

DO: Write a short and plain statement telling what each defendant did wrong.

DO: Use simple English words and sentences.

**DO NOT:** Quote from cases or statutes, use legal terms, or make legal arguments.

DO: Explain when, where, why, and how each defendant violated your rights.

DO: Include every fact necessary to explain your case and describe your injuries or damages.

DO: Number any documents you attach and refer to them by number in your complaint.

**DO NOT:** Include social security numbers, dates of birth, or the names of minors.

DO: Use each defendant's name every time you refer to that defendant.

DO: Number your paragraphs. [The first paragraph has been numbered for you.]

1. On May 1, 2024 I, Jose m. Aguirre went to work in the Elkhart County Jail Kitchen, which is ran by Summit Catering, as an inmate trustee worker. My job duties as the main line cook was to prepare all hot food for the entire Jail Population. During my normal course of work I used several open flamed large kettles. The kitchen would provide us with rubber boots that came up about 10 inches above the ankle. They also provide a thin apron that barely covers the chest & stomach area.
2. When I reported for duty on May 2nd, 2024, I found the kettle that I was instructed to use by Summit Catering supervisor Carl Farley, was broke and would not lock in the upright position, resulting in tipping over and spilling the contents. I showed this to Carl Farley and he instructed me to use it and be careful. Carl Farley contacted the Maintenance Department of the Elkhart County Jail that is responsible for the upkeep of all kitchen appliances. I also showed this to supervisor Kendra, supervisor Chenowich and was instructed to use the kettle but to be careful. I also supervisor Kendra later and showed her that it was a danger to use and she

## Claims and Facts (continued)

(2 continued) told me to let either Carl Harley know or Mrs Chenowitch who is Carl supervisor. I told Mrs. Kendra that I had done this and she walked away from me. Her Employer is Summit Catering

(3) On or About May 7<sup>th</sup>, 2024, I again was working at my job as the Cook and noticed that the Kettle had not been Fixed and I reported this to Carl Harley who said to use it and He (Carl) would contact maintenance again. And Summit who runs the Kitchen.

(4) When I Filled the Kettle with beans and Water, in this Kettle, it was sitting in an upright position. There was 200 pounds of beans in the Boiling Water inside the Kettle. As I went to stir the beans to keep them from burning, The Kettle shifted and leaned over spilling boiling beans down my leg and into the Top of the Left boot. I yelled as it was burning me and tried to get the boot off. When another inmates rushed over to help me. Who are Remon Ramirez, Jorge Chincila Lopez, Lee Underwood and several others. When I was Carried away From the area, I was Finally able to remove my boot and Sock, my foot and lower leg was blistered and stuck to my sock.

(5) Carl Harley was gotten and upon seeing my foot He (Carl) called medical and had me helped to the medical Department where a nurse Took and put cream on it and wrapped it with gauze. I was then told to go back to my dorm and



5 continued

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Was Given two (2) Tylenol and told that I would be referred to see a doctor. It was several weeks before I got to see the Doctor.

(6) When I returned to the dorm, I had to have help as I could Not walk or wear anything on my left foot. IF I tried it would Rub the blisters and cause them to break open and leak a clear Fluid. For the next 45 days I was off work and was still refused medical. It was not healing and I had to crawl to even use the toilet. I was refused treatment and any Grievance that I filed was rejected and was told to stop filing Grievances.

7) After they told me to return to work or be fired on July 15, 2024, I went into work at the Kitchen and tried to put the Rubber work boots on but It caused the still unhealed left foot to bleed and cause me great pain. I also noticed that the Kettle that had caused my injury, still was not Fixed. I asked Summit Supervisors Mrs Kendra, Mrs Chenowich, and Mr Carl ~~Harley~~ to allow me to move jobs as it was painful to wear the boots provided by Summit Catering and the Kettle was still dangerous cause it was NOT Fixed. I was told by all three Supervisors to either return to work at my same job or be written up on a conduct report, be terminated and moved from trustee dorm, which happened a little later.

8) I Now Live in another dorm and still have not seen a doctor but once. I am in constant pain and my foot has not healed all the way, and has severe scars over 60% of my foot from The 3<sup>rd</sup> Degree burns, that will not healed

(8 continued)

and will not allow me to wear any type of shoe on the left foot. Medical will not see me and any Grievance is answered with "Not Grievable". These are all electronic and I can not get a Copy without the Court asking for them. As of today December 22, 2024 I am being told that I would receive NO medical treatment and to stop Filing Grievances.

9) I ask this court to intervene and help me receive treatment and for the court to obtain photo's of my Left Foot to show the seriousness of this burn. I'm finding it hard to walk as there is serious pain and if I bend it, I fill a tearing sensation and is so painful.

10) - I have sent request To Summit seeking medical treatment and Kitchen Supervisor Kendra and Mrs Chenowich and Carl Hurley just ~~wont~~ help me receive the proper medical treatment. I Have Exhausted all my resources and ask that medical help and not one person will.

11) RN Wendy from the medical has also Looked at the burn and advised me it was third (3<sup>rd</sup>) degree Burns. Dr John Foster called me to medical and said that he could not help me due to the medical resources he had available. Both provide no relief from the pain or Kept it From scarring. Which Amendment VIII asserts No cruel and unusual punishment inflicted.



5. When did this event happen?

- ☐ Before I was confined.  
☒ While I was confined awaiting trial.  
☐ After I was convicted while confined serving the sentence.  
☐ Other: \_\_\_\_\_

6. Have you ever sued anyone for this exact same event?

- ☒ No.  
☐ Yes, attached is a copy of the final judgment OR an additional sheet listing the court, case number, file date, judgment date, and result of the previous case(s).

7. Could you have used a prison grievance system to complain about this event?

- ☐ No, this event is not grievable at this prison or jail.  
☒ Yes, I filed a grievance and attached is a copy of the response from the final step. *Electronic*  
☐ Yes, this event was grievable, but I did not file a grievance because \_\_\_\_\_

*could not get a print out of the grievance due to County Jail Policy. Was ordered by Administration to have the court request them and pictures*

8. If you win this case, what do you want the court to order the defendant(s) to do?

[NOTE: A case filed on this form will not overturn your conviction or change your release date.]

*I have Severe Scars and Constant Pain that Needs medical Attention, and Pay for their Negligence and refusing medical to me. Deliberate indifference*

[Initial Each Statement]

JA I will pre-pay the filing fee OR file a prisoner motion to proceed in forma pauperis.

JA I will keep a copy of this complaint for my records.

JA I will promptly notify the court of any change of address.

JA I WILL NOT send more than one copy of any filing to the court.

JA I WILL NOT send summons, USM-285, or waiver forms to the clerk.

JA I declare under penalty of perjury that the statements in this complaint are true.

I placed this complaint in the prison mail system on 12/31/2024 at 10:00 am pm.

[Do not fill in this date and time until you give the complaint to prison officials to send to the court.]

Jose Manuel Aguirre

Signature

78603

Prisoner Number

[DO NOT write in the margins or on the back of any pages. Attach additional pages if necessary.]